

The Professor alludes briefly to a third case, that of a young lady, who was annoyed for a length of time with an oozing of blood from the right caruncula lacrymalis; and also to that of a child, who was brought repeatedly to death's door by spontaneous epistaxis. Sometimes upwards of a pound of blood was lost in the course of a day.—*Med. Chirur. Rev.*, from *Beitrage Zur Pract. Heilkunde*.

7. Hepatic Abscess opening into right lung; matter discharged by expectoration.—An example of this rare termination of hepatitis was recorded by Dr. Joseph Peace, in our number for November last, page 253; another is related by Dr. KUNDE of Berlin, in a recent number of *Casper's Wochenschrift für die gesammte Heilkunde*.

8. Abscess of the Liver bursting spontaneously into the Thorax, and terminating successfully.—The *Calcutta Quarterly Journal* (No. 2, 1837,) contains the following interesting case, communicated by D. STEWART, M. D.—Mr. J. C. S. was seized on the 6th of August, in Canton, with inflammatory symptoms, for which he was leeched on the 10th or 12th, and bled from the arm on the 14th or 15th, and had this treatment afterwards followed up by a succession of leeching and blistering, and the administration of colomel every eight, until the severity of the symptoms gave way. The disease was so far got under before his leaving Canton that he was considered out of danger by his medical attendants, and was recommended by them to go to Macao for the benefit of a purer atmosphere, where he arrived on the 1st of September, labouring under a relapse of all his former symptoms, but of an aggravated and more strongly marked character. He complained of much acute tenderness over the whole region of the liver, so much so as to be scarcely able to bear any degree of pressure of the hand upon any part of it. An attempt even to take a deep inspiration caused very severe pain in the right side. His respiration was short, quick, and attended with cough; tongue coated, mouth parched; quick and sharp pulse; anxiety of countenance, and great general prostration; symptoms clearly indicating that the inflammatory process had exceeded the bounds which admit of a termination of active disease by *resolution*.

The application of leeches to the seat of pain, which was had recourse to repeatedly, and carried as far each time as his reduced state would admit of, afforded only temporary relief. His bowels were carefully attended to and kept open by means of emollient cathartics, with occasional small doses of calumel, and rhubarb, and castor-oil. Counter-irritation by means of blisters and the tartar emetic ointment was kept up; the nitro-muriatic bath was tried, and persevered in for some time, notwithstanding all which no decided benefit was produced.

The above treatment was pursued until the 13th, when a sudden change for the better, in the character of the symptoms, took place. He felt himself all at once relieved, and was sensible of something baving given way within him. On examining his motions next day a very considerable quantity of purulent matter was discovered in them, and in those he passed for several days after, which sufficiently warranted the opinion that had been held, of an abscess having formed in the liver. For ten or twelve days after this he improved considerably, when another return of the symptoms took place. The same remedies were employed as before, together with aodyne fomentations, with the same want of success; he got daily worse, and serious apprehensions regarding his recovery were entertained, when, on the 4th of October, he experienced another sudden change for the better. But this abscess being higher situated in the organ than the former one burst into the *thorax* instead of the *colon*, and the matter was discharged by expectoration. Ever since he has continued to get better, and nothing further was required than a careful attention to the state of the bowels, keeping them open by mild purgatives and emollient cathartics, improving the strength generally by demulcent tonics and strictly regulated diet, and allaying nervous irritability and procuring sleep by means of eight draughts containing the acetate of morphia.

A few days ago he felt some uneasiness in the right side; the cupping-glasses were had recourse to, but as he could not endure them leeches were applied in their stead, and with a very good effect. He is now recovering rapidly.

9. *Tubulo-intestinal Fistula*.—M. G. E. MASLIEUNAT LAGÉMAND in the dissection of a woman of about forty or forty-five years of age, in the dissecting rooms of the *Ecole-pratique*, met with the following very singular pathological condition. There was a perforation of the large intestine at its sigmoid flexure, at which point the intestine adhered to the fallopian tube, and in this last there was also a corresponding perforation, through which fecal matters passed into the cavity of the uterus, and were evacuated through the vagina. No account of the previous history of the patient could be obtained. The dissection is given in detail in the *Archives Générales* for December, 1836.

10. *Atrophy of the Parietes of the Uterus*.—M. RIPAUT reports a case in which he performed the caesarean section, in which the parietes of the uterus were not thicker than the blade of a knife.—*Archives Générales* for November, 1836.

MATERIA MEDICA AND GENERAL THERAPEUTICS.

11. *On the employment of Opium in the Exanthemata*.—By GEORGE G. SIGMOND, M. D.—(Extracted from a course of lectures on Materia Medica and Therapeutics, delivered at the Windmill street School of Medicine.) Opium, in the exanthemata, or those diseases which are attended with specific eruptions, which occur once only during life, is occasionally to be administered; for instance in the confluent small-pox, when salivation, the necessary evacuation, occurs, it is most advantageous, and in stages of debility; but, on the other hand, it should most scrupulously be avoided in the diarrhoea which succeeds measles, the proper cure of which is bleeding; and the same caution is to be exercised in the delirium that attends scarlet fever, and which sometimes precedes it. This delirium, unlike the delirium of fevers, is not to be considered an unfavourable symptom, nor should you allow it to weigh upon the minds of the friends of the patient; it must not be tampered with, and bleeding and blistering are, above all, prejudicial. In active hemorrhage, or fluxes of blood, whilst any fever is present, opium is not to be given; but in passive hemorrhages it is serviceable; in uterine hemorrhages it has the recommendation and authority of Burns, of Gooch, and of Hamilton, and very large quantities may be given at a dose. Mr. Stewart recommends and gives in his practice, in the *Medico-Chirurgical Transactions*, not less than 80 drops at a dose; it certainly is of the greatest value when much restlessness and irritation are present, you must, however, be aware of the fact, that not unfrequently, as a secondary effect, it produces retention of urine; you must also remember, that according to the urgency of the symptoms must be the largeness of the dose, and that once having given a certain quantity you must not diminish it, and, above all, you must not suddenly omit it altogether; these are practical points of great importance, and are to be gathered from the works of the authors I have just named, and from daily experience.—*Lancet*.

12. *On the employment of Opium in Dysentery*.—By G. G. SIGMOND, M. D.—In dysentery, as occurring in Great Britain, opium is most valuable, and here again I must refer you to Sydenham; and also in warmer climates it has met with its supporters—Lind, Wedelius, Bontius. At the same time there are not wanting men of ample experience who do not place any faith in its efficacy in this disease; amongst whom I may mention Pringle, Cleghorn, Blaue, and Baker. A few gentle purges of castor oil, followed by laudanum, is the most general treatment pursued in this country; but care must be taken to give sufficient doses at proper intervals, and not, as Dr. Crumpe has observed, is too often the case, “to give an anodyne at night, which eases and composes the patient, and in the morning, when its efficacy is worn out, and the tortures of the complaint again return, in place of repeating what before proved effectual, to have recourse to some irritating purgative.” Where the intestines have become ulcerated, opium may freely be given as a palliative. In the third volume of the *Medical and Physical Journal*, for 1800, appeared a letter addressed to John Pearson, from Mr. Hope, in which he speaks of opium combined with nitrous acid as a specific, for dysentery. He prescribes, with unvarying success, acid nit. $\frac{5}{ij}$; opii, gr. $\frac{ij}{ij}$; aquæ puræ, $\frac{5}{ij}$;